

Effective January 1, 2003

10 | 049,897

(Column 1)	(Column 2)
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

TOTAL CLAIMS	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY  
TYPE ☐

RATE	FEE
BASIC FEE	375.00
X\$ 9=	
X42=	
+140=	
TOTAL	

OR OTHER THAN  
SMALL ENTITY

	RATE	FEE
OR	BASIC FEE	750.00
OR	X\$18=	
OR	X84=	
OR	+280=	
OR	TOTAL	

(Column 1)	(Column 2)	(Column 3)
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AMENDMENT A	Column 1	Column 2	Column 3	Column 4
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 12	Minus	** 20	= 1
Independent	* 2	Minus	*** 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

## OR SMALL ENTITY

RATE	ADDITIONAL FEE
X\$9=	7
X42=	
+140=	
TOTAL ADDIT. FEE	

	RATE	ADDITIONAL FEE
OR	X\$18=	/
OR	X84=	
OR	+280=	
OR	TOTAL	
	ADDIT FEE	

AMENDMENT B	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDITIONAL FEE	

	RATE	ADDITIONAL FEE
OR	X\$18=	
OR	X84=	
OR	+280=	
OR	TOTAL ADDITIONAL FEE	

AMENDMENT C		(Column 1)		(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDITION FEE	

	RATE	ADDITIONAL FEE
OR	X\$18=	
OR	X84=	
OR	+280=	
OR	TOTAL	
	ADDITIONAL FEE	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

# Best Available Copy